

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 23, 2007  
Secretary of State**

DOCUMENT# 725306

Entity Name: MIAMI BEACH POWER SQUADRON, INC.

**Current Principal Place of Business:**

781 CRANDON BOULEVARD  
SUITE 1801  
KEY BISCAYNE, FL 33149 US

**New Principal Place of Business:**

**Current Mailing Address:**

781 CRANDON BOULEVARD  
SUITE 1801  
KEY BISCAYNE, FL 33149 US

**New Mailing Address:**

FEI Number: 59-6166714      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PERERA, ISMAEL  
781 CRANDON BOULEVARD  
SUITE 1801  
KEY BISCAYNE, FL 33149 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: HAUSMAN, SONIA  
Address: 1719 NE 142 STREET  
City-St-Zip: MIAMI, FL 33181  
  
Title: PD ( ) Delete  
Name: MIZRACHI, ISAAC  
Address: 1715 N 46 AVE  
City-St-Zip: HOLLYWOOD, FL 33021  
  
Title: TD ( ) Delete  
Name: ISMAEL, PERERA  
Address: 781 CRANDON BLVD #1801  
City-St-Zip: KEY BISCAYNE, FL 33149

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:  
  
Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:  
  
Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ISMAEL PERERA

RA

04/23/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date